	1. TRANSMITTAL NUMBER:	2. STATE:
TRANSMITTAL AND NOTICE OF APPROVAL OF	42 020	COLORADO
STATE PLAN MATERIAL	13-029 COLORADO 3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL	
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE	
CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	July 1, 2013 	
5. TYPE OF PLAN MATERIAL (Check One):	J	
NEW STATE PLAN AMENDMENT TO BE CONSIDE	ERED AS A NEW PLAN	X AMENDMENT
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMEN		ch amendment)
6. FEDERAL STATUTE/REGULATION CITATION	7. FEDERAL BUDGET IMPACT a. FFY 2012-13: \$2,472	
42 CFR 440.210(a)(2)(ii)	b. FFY 2013-14 \$9.889	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	9. PAGE NUMBER OF THE	SUPERSEDED PLAN
6. PAGE NOMBER OF THE FLAN SECTION ON ATTACHMENT	SECTION OR ATTACHMENT (If Applicable) Attachment 4.19-B: Methods and Standards for Establishing Payment Rates – Other Types of Care – 20. Extended Services for Pregnant Women (TN 11-	
Attachment 4.19-B: Methods and Standards for		
Establishing Payment Rates – Other Types of Care –		
20. Extended Services for Pregnant Women	20. Extended Services for Pre	gnant women (IN 11-
10. SUBJECT OF AMENDMENT		
Medicaid reimbursement for extended services for pregna	nt women, reflecting rate increa	ses as of July 1, 2013.
44 COMEDNO DE MENTOL COLOR		
11. GOVERNOR'S REVIEW (Check One)		
GOVERNOR'S OFFICE REPORTED NO COMMENT	X OTHER, AS SPECIFIED	
	•	
Governor's letter dated 1 September 2011		
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTA	Λ1 -	
NO REPLY RECEIVED WITHIN 43 DAYS OF SUBWITTI	TL	
12. SIGNATURE OF STATE AGENCY OFFICIAL	16. RETURN TO	
	•	
13 TYPED NAME	Colorado Department of Health (Care Policy and Financing
13. TYPED NAME	Colorado Department of Health 0 1570 Grant Street	Care Policy and Financing
13. TYPED NAME Suzanne Brennan		Care Policy and Financing
	1570 Grant Street	Care Policy and Financing
Suzanne Brennan 14. TITLE	1570 Grant Street Denver, CO 80203-1818	Care Policy and Financing
Suzanne Brennan	1570 Grant Street Denver, CO 80203-1818	Care Policy and Financing
Suzanne Brennan 14. TITLE Medicaid Director 15. DATE SUBMITTED	1570 Grant Street Denver, CO 80203-1818	Care Policy and Financing
Suzanne Brennan 14. TITLE Medicaid Director	1570 Grant Street Denver, CO 80203-1818 Attn: Barbara Prehmus	Care Policy and Financing
Suzanne Brennan 14. TITLE Medicaid Director 15. DATE SUBMITTED August 30, 2013 FOR REGIONAL C	1570 Grant Street Denver, CO 80203-1818 Attn: Barbara Prehmus OFFICE USE ONLY 18. DATE APPROVED 2 / /	
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